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Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION (37 CFR 1.63) FOR
UTILITY OR DESIGN APPLICATION
USING AN APPLICATION DATA SHEET
(37 CFR 1.76)**

Applicati n Numb r	10/076,961
Filing Dat	February 15, 2002
First Nam d Inv nt r	Nallan C. Suresh
Confirmation No.:	2025
Group Art Unit	2171
Examiner Name	Not yet known
Attorney Docket Number	13553-06704

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☐ The attached application entitled: Sequencing Models of Healthcare Related States, or
- ☒ Application No. 10/076,961, filed on February 15, 2002,
- ☐ as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

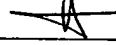
All statements made herein of my/our knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S)

Inventor one: Nallan C. Suresh Citizen of: USA

Signature:  Date: 5/22/02

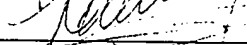
Inventor two: Jean de Traversay Citizen of: Canada

Signature:  Date: 6/20/02

Inventor three: Hyma Gollamudi Citizen of: India

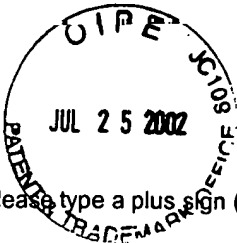
Signature:  Date: 6/18/02

Inventor four: Krassimir G. Ianakiev Citizen of: Bulgaria

Signature:  Date: 5/22/02

☒ Additional inventors are being named on 1 additional form(s) attached hereto.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
<p>As the below named inventor(s), I/we declare that:</p> <p>This declaration is directed to:</p> <div style="margin-left: 40px;"> <input type="checkbox"/> The attached application entitled: Sequencing Models of Healthcare Related States, or <input checked="" type="checkbox"/> Application No. <u>10/076,961</u>, filed on <u>February 15, 2002</u>, <input type="checkbox"/> as amended on _____ (if applicable); </div>	
<p>FULL NAME OF INVENTOR(S)</p>	
<p>Inventor five: <u>Anu K. Pathria</u></p>	<p>Citizen of: <u>Canada</u></p>
<p>Signature: <u>Anu K. Pathria</u></p>	<p>Date: <u>5/23/2002</u></p>
<p>Inventor six: <u>Michael K. Tyler</u></p>	<p>Citizen of: <u>USA</u></p>
<p>Signature: <u>Michael K. Tyler</u></p>	<p>Date: <u>5/22/02</u></p>
<p>Inventor seven: _____</p>	<p>Citizen of: _____</p>
<p>Signature: _____</p>	<p>Date: _____</p>
<p>Inventor eight: _____</p>	<p>Citizen of: _____</p>
<p>Signature: _____</p>	<p>Date: _____</p>
<p>Inventor nine: _____</p>	<p>Citizen of: _____</p>
<p>Signature: _____</p>	<p>Date: _____</p>
<p>Inventor ten: _____</p>	<p>Citizen of: _____</p>
<p>Signature: _____</p>	<p>Date: _____</p>
<p>Inventor eleven: _____</p>	<p>Citizen of: _____</p>
<p>Signature: _____</p>	<p>Date: _____</p>
<p>Inventor twelve: _____</p>	<p>Citizen of: _____</p>
<p>Signature: _____</p>	<p>Date: _____</p>
<p>Inventor thirteen: _____</p>	<p>Citizen of: _____</p>
<p>Signature: _____</p>	<p>Date: _____</p>



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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	10/076,961
	Filing Date	February 15, 2002
	First Named Inventor	Nallan C. Suresh et al.
	Title	Sequencing Models of Heathcare Related States
	Confirmation No.:	2025
	Group Art Unit	2171
	Examiner Name	Not yet known
	Attorney Docket Number	13553-06704

I hereby appoint:

☐ Practitioners at Customer Number 00758 →

OR

☒ Practitioner(s) named below:

Name	Registration Number
Robert R. Sachs	42,120
Daniel R. Brownstone	46,581
Robert A. Hulse	48,473

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

I am the:

☒ Applicant/Inventor **OR** ☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record	
Name	Nallan C. Suresh
Signature	
Date	5/22/02

I am the:

☒ Applicant/Inventor **OR** ☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record	
Name	Jean de Traversay
Signature	
Date	6/20/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.



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Applicant/Inventor **OR**

☐

Assignee of record of the entire interest. See 37 CFR 3.71.

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SIGNATURE of Applicant or Assignee of Record

Name	Hyma Gollamudi
Signature	
Date	6/18/02

I am the:

☒

Applicant/Inventor **OR**

☐

Assignee of record of the entire interest. See 37 CFR 3.71.

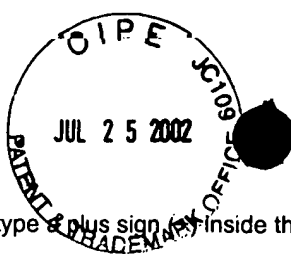
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Krassimir G. Ianakiev
Signature	
Date	5/22/02

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Anu K. Pathria
Signature	<i>Anu K. Pathria</i>
Date	5/23/2002

I am the:



Applicant/Inventor **OR**



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Michael K. Tyler
Signature	<i>Michael K. Tyler</i>
Date	5/22/02

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☒ *Total of 3 forms are submitted.

13553/06704/SF/5073401.1